## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼	
True Blue Florida	C C00617696
Check if X 24-hour report 48-hour report New report Amends report filed on	
Full Name of Payee Adkins & Associates, Inc.	Date of Public Distribution/Dissemination
Mailing Address 121 Alhambra Plaza	08 05 2016 Amount
Suite 1209	
City State Zip Code Coral Gables FL 33134	Transaction ID : SE.4130 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail  Category/ Type	004 08 04 04 2016
Name of Federal Candidate	pport Office Sought: X House District: 09
Dames Oats	pose President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 55946.33	Disbursement For:
Full Name of Payee	Date of Public Distribution/Dissemination
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type	Date of Disbursement or Obligation
	pport Office Sought: House District:  pose President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	12900.54
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	12900.54
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
James T. Kitchens  [Electronically Filed]  Signature	Date 08 / 06 / 2016